SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, Wi 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

Date Stamp (Received)

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22214

Refund: Date: Permit #: Amount Paid: 45/20 10-25-14 14-0398

Checks a

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TO ADDI ICANT	Bayriold 06, 77

Toold for Issuance		Municipal Use			☐ Commercial Use				🔀 Residential Use	•			Proposed Use	Proposed Construction:	Existing Structure: If permit being applied for is relevant to it)					1			of Completion * include donated time & material	Value at Time	Non-Shoreland	ÄShoreland →		Section	1/4,	PROJECT LOCATION			Contractor:	Address of Property:	Loan Felno	Owner's Name:	TYPE OF PERMIT REQUESTED ** X LAND USE
		T			Se				Ф				•	ion:	(if permit bei		Property	Run a Business on	☐ Relocate (existing bldg)	Conversion	☐ Addition/Alteration	XNew Construction	Project			X Is Property	☐ Is Property Creek or Land	, Township	1/4	Legal Description: (Use Tax Statement)	STUASSER	5 29	1 Amy	•	Bay		HIFSTFD.
	Accessory Building	Addition/	Mobile Ho	Bunkhous							Residence	Principal S		0 7 7	ng applied for			ness on	xisting bldg)	-	lteration	ruction	ct			/Land within	☐ Is Property/Land within 300 feet of I Creek or Landward side of Floodplain?	44	Gov't Lot	tion: (Use Ta		CABEUS	d /)	Cond)	X LAND USE
	Accessory Building (specify) GCLVCQ C	Addition/Alteration (specify)	Mobile Home (manufactured date)	Bunkhouse w/ (☐ sanitary, or □	with Attached Garage	with (2 nd) Deck	with a Deck	with (2 nd) Porch	with a Porch	with Loft	Residence (i.e. cabin, hunting shack, etc.)	Principal Structure (first structure on property)			r is relevant to it)	FOUND A	☐ Foundation	☐ No Basement		☐ 2-Story	☐ 1-Story + Loft	X 1-Story	# of Stories and/or basement			\(\text{\text{Is Property/Land within 1000 feet of Lake, Pond or Flowage}\)	☐ Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? If yes—continue —▶	N, Range 9	Lot Lot(s)				SHAWA C		0		USE SANITARY
	on/Alteratio	oify)	ed date)		Garage	~ 		ch			ing shack, et	tructure on p	Propose	Length:	Length:			 			_	☐ Seasonal				, Pond or Flowage If yescontinue	Stream (incl. Interm	W	CSM Vol	<u>Pin</u> : (23 digits) 04 -	-62-cn-1405	715-923-3938	Contractor Phone:	City/State/Zip:	1350	Þ	ARY PRIVY
	n (specify)	3		sleeping quarters, <u>or</u>							c.)	property)	Proposed Structure	28	•••						🕾 Year Round	sonal	Use			rage nue —₩	nue —	15 ARNES	ol & Page					^,	STOIS SE	SIT	
- The state of the																		X None		3	□ 2	□ 1	# of bedrooms	-		Distance Stru	Distance Stru	Š	Lot(s) No.		1372 500	by suffice the	Plumber:		ADDIESS	City	GONDITIONAL USE
		A TOTAL PROPERTY OF THE PROPER		☐ cooking & food prep facilities)										width: 30	Width:	None	☐ Compost Toilet	1	☐ Privy (Pit)	Sanitary (Exists) Specify Type	□ (New) Sanitary	☐ Municipal/City	S			Distance Structure is from Shoreline: $S\mathcal{OO}$ fee	Distance Structure is from Shoreline :		. Block(s) No.		Souners AUE	Agent Mariting Address (include City/State/7in).	****	ヘンタース	265	id <u>r</u>	
				lities)										Q			t Toilet	(w/ser	t) or	(Exists	anitary	al/City	Wh ewer/S			horelin	horelin	[a		Vo Re	ZZ 2	tv/State				T. C.	SPECIAL USE
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-	× 00 × 00	<i>§</i> ×	×	×	×	×	×	×	×	×	×	×	imensions	1	H C			ntract)	☐ Vaulted (min 200 gallon)	ify Type	Specify Type:		What Type of Sewer/Sanitary System Is on the property?			XYes □ No	Is Prop Floodpla		Echo	337	077						□ B.O.A.
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	840	8/18											Square Footage	16'					llon)		XWell	☐ City	Water			XYes □ No	Þ	Acreage 7.8		337 Page(s) 66	ed No	Written Authorization	Plumber Phone:	LC20 CAL-749	!	one:	OTHER

FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by **Bayfield County** in determining whether to issue a permit. I (we) further accept liability which may be a result of **Bayfield County** relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Address to send permit 10/656

Authorized Agent:

(If you

are signing on behalf of the

owner(s) a letter of authorization must

ust sign or letter(s) of authorization must accompany this application)

Date

9-17-14

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Owner(s):

(If there are Multiple Owners

s listed on the De

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Special Use: (explain)

Conditional Use: (explain)

 $\times |\times| \times$

Other: (explain)

Secretarial Staff

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PO Box 58 Washburn, WI 54891 (715) 373-6138

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Bayfield Co. Zoning Dext.	1 007 1 5 2014 W	The Court of Miscons o	LICATION FOR PERMIT
Refund:	Amount	Date:	Permit #

Paid: \$75 14.0399

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Secretarial Staff		ာ	Rec'd for Issuance		☐ Municipal Use			Commercial Use				X Residential Use				Proposed Use	Proposed Construction:	Existing Structure: (If permit being applied for is relevant to it)	- Designation of the second of			gorono	1		Value at Time of Completion *include donated time & material	☐ Non-Shoreland	Shoreland —		Section _3	1/4,	PROJECT LOCATION	Authorized Agent: (Person Signing Appl	Contractor:	Address of Property:	Owner's Name:	TYPE OF PERMIT REQUESTED \(\rightarrow\) X LAND USE \(\pi\) S
			f	\dagger		(=		Ise				šė				<u> </u>	tion:	(if permit bein		Property	Run a Business on	☐ Conversion	XAddition/Alteration	New Construction	Project		K Is Property,	☐ Is Property/Land within 300 feet of F Creek or Landward side of Floodplain?	, Township	1/4	Legal Description:	(Person Signing Application on behalf of Owner(s))	Ž Ž		M. R.	QUESTED->
Other: (explain)	Conditiona	Special Use: (explain)	Accessory	Accessory	Accessory Building	Mobile Ho	Bunkhous		and the same and t					Residence	Principal S			g applied for			less on		Iteration	ruction	4		/Land within	/Land within /ward side of	44	Gov't Lot	ł	ation on behalf			Riesc	K LAND USE
olain)	Conditional Use: (explain)	e: (explain)	Accessor A parismile and month business and special	Building Addit		Mobile Home (manufactured date)	Bunkhouse w/ (☐ sanitary, or ☐ sleeping quarters, or	with Attached Garage	with (2 nd) Deck	with a Deck	with (2 nd) Porch	with a Porch	with Loft	Residence (i.e. cabin, hunting shack, etc.)	Principal Structure (first structure on property)			is relevant to it)			No Basement		1-Story + Loft	□ 1-Story	# of Stories and/or basement		义ls Property/Land within 1000 feet of Lake, Pond or Flowage If yescontinue	☐ Is Property/Land within 300 feet of River, Stream (ind. Intermittent) Creek or Landward side of Floodplain? If yes—continue —▶	N, Range 9	.ot Lot(s)	(Use Tax Statement)		15			USE SAN
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			ion (specify	ion (enacify)	Sugar.	7	ing quarters,							etc.)	n property)	Proposed Structure	#:	5					Year Round	Seasonal	Use		owage ntinue →	l. Intermittent)	Town of: B	Vol & Page	PIN: (23 digits) 04-004-2-44-09-03-			ָּהָ	ess: Talke Ra	□ PRIVY □
				The state of the s	2000											ře					Xi L	 ⇔	□ 2	1	# of bedrooms	,	Distance S	Distance Structure	Bornes	Lot(s) No.	Ui	Agent Mailing	Plumber:		7.7	CONDITIONAL USE
				***************************************	V / C / C / C / C / C / C / C / C / C /	Some Hillestral	cooking & food prep facilities)				**************************************						Width:	Width:	□ None		Portable (w/service contract)	Sanitary (Exists) Specify Type: Con V	☐ (New) Sanitary	☐ Municipal/City			Distance Structure is from Shoreline:	tructure is from Shoreline : fee		Błock(s) No.	05-004-11000	Agent Mailing Address (include City/State/Zip):		•	City/State/Zip: Ba/MeS,W7	
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×	×	×		×	× 5 5 0	ر <	< ×	×	×	×	×	×	×	×	×	Dimensions	II.	He.			ontract)	cify Type: (Specify Type:		What Type of Sewer/Sanitary System Is on the property?		X Yes □ No	Is Property in Floodplain Zone		ioh: ⁻⁶ /	Document:	Administrative in the contract of the contract			لل	□ B.O.A.
•	}	_	-	_ .		- -	_	_			_	-	-		-	Σ.	Height:	Height:			HOLLPS OO7	V MO.					vo es	erty in n Zone?	Acreage : 604		: (i.e. Prope Page(s	Written Authori Attached 'Yes X' No	Plumber Phone:	Cell Phone:	Telephone: 715	01
					260	ان ا							***************************************		rootage	Square					***************************************		 	□ City	Water		□ Yes XNo	Are Wetland: Present?	406	o c	Recorded Document: (i.e. Property Ownership) Volume 646 Page(s)	Written Authorization Attached □ Yes ※ No	hone:	::	lephone: 715 795-3163	OTHER

Attach

Copy of Tax Statement

If you recently purchased the property send your Recorded Deed

Date

Date

10-14-14

19× IO 1301

Address to send permit SQM &

S

above

Owner(s): A MANNA MI (If there are Mukiple Owners listed on the

Deed All Owners

must sign or letter(s) of authorization must accompany this application)

Canad S

Authorized Agent:

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I(we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) imit from a complete of the complet

ow Draw or Sketch your	Property (regardless of what you are applying for)	plying for)	•
(1) Show Location of: Prop. (2) Show / Indicate: Nort! (3) Show Location of (*): (*) Di (4) Show: (5) Show: All Ex (6) Show any (*): (*) Le (7) Show any (*): (*) Le	Proposed Construction North (N) on Plot Plan (*) Driveway <u>and</u> (*) Frontage Road (!) All Existing Structures on your Proper! (*) Well (W); (*) Septic Tank (ST); (*) I (*) Lake; (*) River; (*) Stream/Creek; (*) Lake; (*) River; (*) Slopes over 20%	Proposed Construction North (N) on Plot Plan (*) Driveway <u>and</u> (*) Frontage Road (Name Frontage Road) All Existing Structures on your Property (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Wetlands; or (*) Slopes over 20%	
	See attack	tachment	
Please complete (1) (7) above (prior to continuing) (8) Setbacks: (measured to the closest point)	inving) losest point)	Changes in plans must be approved by the Plannin	by the Planning & Zoning Dept.
-	remen	Description	Measurement
Setback from the Centerline of Platted Road Setback from the Established Right-of-Way	40.4 Feet	Setback from the Lake (ordinary high-water mark) Setback from the River, Stream, Creek Setback from the Bank or Bluff	VA Feet
Setback from the North Lot Line Owa Ken	NA Feet	Setback from Wetland	WA Feet
Setback from the West Lot Line Setback from the East Lot Line			
Setback to Septic Tank or Holding Tank Setback to Drain Field	1000 1000 1000 1000 1000 1000 1000 100	Setback to Well	300 + Feet
Setback to Privy (Portable, Composting) Nor to the placement or construction of a structure within ten (10) feet of the proviously surveyed corner or marked by a licensed surveyor at the owner of the proviously surveyed corner or marked by a licensed surveyor at the owner of the proviously surveyed corner or marked by a licensed surveyor at the owner of the proviously surveyed corner or marked by a licensed surveyor at the owner of the proviously surveyed corner or marked by a licensed surveyor at the owner of the proviously surveyed corner or marked by a licensed surveyor at the owner of the proviously surveyed corner or marked by a licensed surveyor at the owner of the proviously surveyed corner or marked by a licensed surveyor at the owner of the proviously surveyed corner or marked by a licensed surveyor at the owner of the proviously surveyed corner or marked by a licensed surveyor at the owner of the proviously surveyed corner or marked by a licensed surveyor at the owner of the proviously surveyed corner or marked by a licensed surveyor at the owner of the proviously surveyed corner or marked by a licensed surveyor at the owner of the proviously surveyor at the owner of the proviously surveyor of the proviously surveyor or the proviously surveyor of the proviously surveyor or the provious	et of the minimum required setback, the bour	ndary line from which the setback must be measured must be visible from one previously	isly surveyed carner to the
rior to the placement or construction of a structure more than ten (1 ne previously surveyed corner to the other previously surveyed corner to the other previously surveyed corner to the owner's expense. (9) Stake or Mark Proposed Loc: NOTICE: All Land Use P For The Construction Of New Or	o) feet but less than thirty (30) feet from the ner, or verifiable by the Department by use of a stion(s) of New Construction. See ermits Expire One (1) Year from the least Two Family Dwelling: ALL Mure & Two Family Dwelli	rior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense. (9) Stake or Mark Proposed Location(s) of <u>New Construction</u> , <u>Septic Tank (ST)</u> , <u>Drain field (DF)</u> , <u>Holding Tank (HT)</u> , <u>Privy (P)</u> , and <u>Well (W)</u> . NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.	nust be visible from ture, or must be Well_(W).
Issuance Information (County Use Only) Permit Denied (Date):	Sanitary Number: 06-1	1715 # of bedrooms? \ Sanitary Date: C	32-38-C
Permit#: 4-0399	Permit Date: 10-22	1 Call 0.00.	
Lot XXYe hip □Ye ing □Ye	IS (Deed of Record) 152, 153 INO M IS (Fused/Contiguous Lot(s)) XNO M	Mitigation Required ☐ Yes SNo Affidavit Required Mitigation Attached ☐ Yes SNo Affidavit Attached	□Yes ÆNo □Yes ÆNo
Granted by Variance (B.O.A.) Li Yes XNo Case #:		Previously Granted by Variance (B.O.A.) Case #:	
Was Parcel Legally Created 发Yes (Was Proposed Building Site Delineated 文Yes)	□ No <u>exis 1/45</u>	Were Property Lines Represented by Owner Was Property Surveyed Yes	□ No
Inspection Record: Standtine is existing		g District Classification	(R-1)
Date of Inspection: $19-14-17$ Ins Condition(s):Town, Committee or Board Conditions Attached?	pected by: //// ☐ Yes ☐ No ─(If	No they need to be attached.)	ion:
No increase in struct	2 Gootpu	7	J per
ector: Michael F	de	7	2-14
Hold For Sanitary: Hold For TBA:	Hold For Affidavit:	Hold For Fees:	



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PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

Date Stamp (Received) Ç∱: Ç[†], <u>~</u> ~

Refund:

Permit #: Date: Amount Paid: アクイグ

[NSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department.

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		× >	- -	Special Use: (explain)		
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	J	×		with Attached Garage	Control of the Contro	☐ Commercial Use
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	- -	< ×	1	with Loft	,	
	_	×		Residence (i.e. cabin, hunting shack, etc.)		
	_	×	_	Principal Structure (first structure on property)	□ Pr	The state of the s
Square Footage	ions	Dimensions		Proposed Structure	<u> </u>	Proposed Use
18:07	Height:		1 10	Length: メル・ク・・ Width: メル・		Proposed Construction:
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x wel		Specify Type:		☐ 1-Story + Loft	☐ Addition/Alteration	ı
☐ City		,	₹	ion IX 1-Story ☐ Seasonal ☐ 1 ☐ Municipal/City	New Construction	material X New
Wate	em ?	What Type of wer/Sanitary System Is on the property?	What Type of Sewer/Sanitary Sy: Is on the propert	# of Stories and/or basement Use # W Sewer, Is on	Project	Value at Time of Completion *include donated time &
	***************************************					Non-Shoreland
	2		_ feet	If yescontinue -	·	
	Floodplain Zone?	Hood	line:	Als Property/Land within 1000 feet of Lake, Pond or Flowage Distance Structure is from Shoreline:	operty/Lar	Xshoreland — Xus Pi
<u>></u>	ls Property in	ls Pr	line :	liver, Stream (ind. Intermitte	operty/Lar	□ Is Pa
863	Acreage	C00±	Ust Size	44 N, Range DY W TOWN OF BARNES	, Township 4	Section 20, To
		ion:	Subdivision:	tot(s) No. Block(s) No.	1/4	1/4,
e(s) 2 5	D Pag	5 88	Volume _	Legal Description: (Use Tax Statement) 04-004ースー44〜09-ス0〜105〜022〜 V	Description	PROJECT LEGAL LOCATION LEGAL
Attached MACING	Attache	REA HO	HAMUA	Agent Malling Audress Include City.	Application (Carlos	Authorized Agent: (Person Signi
rumber rione:	W. Honor	•	to /7im/s)/5-462-4170	Coxes	RUSS SMITH
612-190-37	617		23	HES	`_	Address of Property: ABも30 Sto AE
	2	55	<i>X</i> / <i>X</i> /	28 THAVE NE HAM LAKE,	254	MARK AND KAD
DOTHER	-	B.O.A.	YL USE	X LAND USE ☐ SANITARY ☐ PRIVY ☐ CONDITIONAL USE ☐ SPECIAL USE Mailing Address: City/State/Zio:		TYPE OF PERMIT REQUESTED ->
PSW PROPERTY CONTRACTOR CONTRACTO	8	- CONTRACTOR - CON	9/07/10/09/09	N ISSUED TO APPLICANT.	NTIL ALL PER	DO NOT START CONSTRUCTION U

Owner(s):

(If there are Multiple

Owners

the Deed All Owier

ust sign <u>or</u>

of authorization must accompa

this application)

Date

Date

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an RACTOR

Authorized Agent:

Address to send permit

(If you are signing on behalf of the owner(s) a lit 90.52 M

Dana

9032 W

CONTY

KOAO

Letter of authorization must accompany this application)

HAYWARD,

IT . SHEHS Copy of Tax Statement V
If you recently purchased the property send your Recorded Deed

MARK CHKPS 48630 STOXERDAD, BAR Hold For Sanitary: Signature of Inspector: Mac Permit #: Issuance Information (County Use Only) Setback from the North Lot Line Setback from the South Lot Line Setback from the West Lot Line Setback from the Established Right-of-Way Date of Inspection: Granted by Variance (B.O.A.) Permit Denied (Date): Setback from the East Lot Line Condition(s):Town, Co Inspection Record: etback to **Drain Field** Is Parcel in Common Ownership
Is Structure Non-Conforming Was Parcel Legally Created Was Proposed Building Site Delineated etback to **Privy** (Portable, for to the placement or construction Please complete (1) -- (7) above (prior to continuing) to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from sreviously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known comer within 500 feet of the proposed site of the structure, or must be set by a licensed surveyor at the owner's expense. MIDDLE EADCLAIRE Is Parcel a Sub-Standard Lot to Privy (Portable, Composting)
placement or construction of a structure within ten (10) feet of t
usly surveyed corner or marked by a licensed surveyor at the ow un LAKE my 7 12 (1) (2) (3) (5) (6) (7) ture. all. Show any (*): Show any (*): Show: Show: Show Location of (*): Show Location of: <u>euseMtリー</u> Centerline of Platted Road Show / Indicate Setbacks: (measured to the closest point) eusling jittee or Board 23 ESTIMATE Case #: .90 ACRES ¥Yes Yes Hold For TBA: Ð, s (Fused/Contiguous Lot(2) Steucture X Yes X Yes (Deed of Record) iditions, Attached? The local Town, Village, City, State or Federal agencies may also require permits. (*) Driveway and (*) Frontage Road (Name Frontage Road)
All Existing Structures on your Property
(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)
(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond
(*) Wetlands; or (*) Slopes over 20% **Proposed Construction** 6 North (N) on Plot Plan □ □ 8 8 man Sanitary Number: Inspected by: Permit Date: Reason for Denial: Measurement 150 + ₹ B &ු Yes 7 Hold For Affidavit: 沙 全つみ stures hal 20 □ X □ Feet Feet Feet 0, Feet Feet Feet • METT-0 ~ 1 EXISTAG 0 3 Previously Granted by Variance (B.O.A.) Mitigation Required Mitigation Attached Setback from Wetland
20% Slope Area on property
Elevation of Floodplain idary line from which the setback must be measured must be visible from Setback from the River, Stream, Creek Setback from the Bank or Bluff Were Property Lines Represented by Owner
Was Property Surveyed Setback to Well Setback from the Lake (ordinary high-water mark) 7 <u>_</u>~ 80 HOUSE 2202 husting Changes in plans must be approved by the Planning & Zoning Dept. Hold For Fees: A. # of bedrooms: 8_ 00 water □ Yes Description State M. Co. EXISTING TANK 1 under EXISTMG CONCRETE 50 Affidavit Required
Affidavit Attached 500 □ X Yes Lakes Classification Zoning District Sanitary Date: Date of Re-Inspection 24,24 Yes 60' ± 36 400 PROPOSEL GARAGE JAKNOCHII Store ⊠Yes NJA Measurement 35 14 18/2 2 Po. Accor 40, 1/2> 7 rveyed corner to the Yes N N □ No Feet Feet Feet 2 8

<u>Draw</u> or <u>Sketch</u> your Property (regardless of what you are applying for)